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**APPLICANTS**  
 Ting Sun, San Jose, CA;  
 Yan Shi, San Jose, CA;

**\*\* CONTINUING DATA \*\*\*\*\*** *NONE TP*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *NONE TP*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 05/09/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> <i>TP</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 11	<b>INDEPENDENT CLAIMS</b> 3
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**ADDRESS**  
 Jim H. Salter  
 Blakely, Sokoloff, Taylor and Zafman LLP  
 1279 Oakmead Parkway  
 Sunnyvale, CA 94085

**TITLE**  
 Low-pass filter usable with caller ID device

<b>FILING FEE RECEIVED</b> 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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